MEXPORTS
BY Susana Molina

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Purchase Order

ORDER NO. | INVOICE DATE:

DATE SHIPPED:

BUYER:

TERMS: **PREPAID**

SOLD TO:	SHIP TO:
PH FAX	PH FAX
RESALE TAX NUMBER:	

QTY	MODEL	DESCRIPTION	TOP	UNIT PRICE	AMOUNT

☐ VISA ☐ MASTERCARD ☐ CHECK ENCLOSED

CARD NUMBER EXP. __ __ / __ __ SEC. __ __ __

__ __ __ __ - __ __ __ __ - __ __ __ __ - __ __ __ __

ADDRESS

AS SHOWN ON CREDIT CARD

SIGNATURE

AS SHOWN ON CREDIT CARD

TOTAL

ALL SALES ARE FINAL

Thank You!